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FEC FORM 3X

FE6AN026

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

		. 0. 0	, (IIICI	man An Addi	011200	00			Office Us	se Only	
1.	NAME OF COMMITTEE (in full)			IAILING LABEL OR PRINT 🗑	Exan	nple:If typi the lines	ng, type				
1 ,	American Academy of De	rmatology /	Assoc	ciation Political Actio	n Comm	ittee	1 1 1			1 1 1	, , , 1
Ш											
AD	DRESS (number and street)		50 I St	: NW							
	Check if different	Ste	870 								
L	than previously reported. (ACC)	L Wa	shing	ton				DC	2	0005	
2.	FEC IDENTIFICATION N	UMBER	*	CITY	' A			STATE	4	ZIPCODE	A
	C00359539				THIS PORT	X	NEW (N)	OR	AMENDED (A)		
4.	TYPE OF REPORT (Choose One)	(b)) Mor Rep	oort Feb 2	20 (M2)		May 20 ((M5) X	Aug 20 (M8)		Nov 20 (M11) Non-Election (ear Only)
	(a) Quarterly Reports:		Due	e On: Mar 2	20 (M3)		Jun 20 (M6)	Sep 20 (M9)		Dec 20 (M12) Non-Election (ear Only)
	April 15			Apr 2	20 (M4)		Jul 20 (N	Л 7)	Oct 20 (M10)		Ian 31 (YE)
	Quarterly Repor	t(Q1)	(c)	12-Day		Primary (1:	2P)	Ge	neral (12G)		Runoff (12R)
	July 15 Quarterly Report	t(Q2)	(0)	PRE-Election	Η.	i iiiiai y (ii	_1 /		noral (12a)	Ш.	1011 (1211)
	October 15			Report for the:		Conventior	1 (12C)	Sp	ecial (12G)		
	Quarterly Reportant January 31 Quarterly Reportant Quarterly Reportant Page 1988	` '		Election	ı on				-	in the	
	July 31 Mid-Yea			Liection						State of	
	Report(Non-election Only) (MY	ction	(d)	30-Day Post -Election		General (3	0G)	Ru	noff (30R)		Special (30S)
	Termination Re (TER)	port		Report for the:		-				in the	
_	(1211)			Election	on			<u> </u>		State of	L.,
5.	Covering Period	07	0 1	2008		through	(7 3	2008		
l ce	ertify that I have examined th	nis Report a	and to	the best of my know	vledge a	nd belief it	is true, co	rrect and com	plete.		
Тур	pe or Print Name of Treasur	er <u>St</u>	even	Debnar							
Sig	nature of Treasurer Elec	ctronically F	Filed b	oy Steven Debnar				Date	08	7 2	008
NO	TE : Submission of false, e	erroneous, o	or inc	omplete information	may sub	ject the pe	rson signi	ng this Repor	to the penalties	of 2 U.S.0	C 437g.
	Office Use									FORM v. 12/2004	

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) OF RECEIPTS AND DISBURSEMENTS
Page 2

Write or Type Committee Name American Academy of Dermatology Association Political Action Committee D D " D 0.7 0.7 0 1 2008 3 1 2008 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 2008 285970.34 January 1 (b) Cash on Hand at 270861.56 Begining of Reporting Period 4000.00 162187.00 (c) Total Receipts (from Line 19) (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 274861.56 448157.34 6(a) and 6(c) for Column B) 16596.79 189892.57 7. Total Disbursements (from Line 31) Cash on Hand at Close of Reporting Period 258264.77 258264.77 (subtract Line 7 from Line 6(d)) 9. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission 999 E street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004) Page 3

Write or Type Committee Name

American Academy of Dermatology Association Political Action Committee

0 1 м м 0 7 м м 0 7 3^D1 2008 2008 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 139182.00 2000.00 (i) Itemized (use Schedule A) 0.00 21005.00 (ii) Unitemized (iii) TOTAL (add 2000.00 160187.00 Lines 11(a)(i) and (ii) 0.00 0.00 (b) Political Party Committees Other Political Committees 2000.00 2000.00 (such as PACs) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry 4000.00 162187.00 Totals to Line 33, page 5) 12. Transfers From Affiliated/Other 0.00 0.00 Party Committees 0.00 0.00 13. All Loans Received 0.00 0.00 14. Loan Repayments Received 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 0.00 0.00 (Carry Totals to Line 37, page 5) 16. Refunds of Contributions Made to Federal candidates and Other 0.00 0.00 Political Committees 17. Other Federal Receipts 0.00 0.00 (Dividends, Interest, etc.) 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account 0.00 0.00 (from Schedule H3) 0.00 0.00 (b) Levin Funds (from Schedule H5) 0.00 0.00 (c) Total Transfer (add 18(a) and 18(b)). 19. Total Receipts (add Lines 11(d), 4000.00 162187.00 12, 13, 14, 15, 16, 17, and 18(c)) 20. Total Federal Receipts 4000.00 162187.00 (subtract Line 18(c) from Line 19)

DETAILED SUMMARY PAGE

of Disbursements

Page 4

FEC Form 3X (Rev. 02/2003)

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. O	perating Expenditures: a) Shared Federal/Non-Federal		
(c	Activity (from Schedule H4)	0.00	0.00
	(i) Federal Share	0.00	0.00
	(ii) Non-Federal Share	0.00	0.00
(b	, ,	96.79	4392.57
(c	Expenditures	30.73	4332.37
`	(add 21(a)(i), (a)(ii) and (b))	96.79	4392.57
	ransfers to Affiliated/Other Party	0.00	0.00
3. Č	contributions to	0.00	0.00
F aı	ederal Candidates/Committeesnd Other Political Committees	16500.00	185500.00
	ndependent Expenditure	0.00	0.00
5. C	use Schedule E)oordinated Expenditures Made by Party		
(ι	ommittees (2 U.S.C. 441a(d)) use Schedule F)	0.00	0.00
6. L	oan Repayments Made	0.00	0.00
	oans Made	0.00	0.00
8. R (a	efunds of Contributions To: a) Individuals/Persons Other Than Political Committees	0.00	0.00
(k	b) Political Party Committees	0.00	0.00
(0	:		
	(such as PACs)	0.00	0.00
(0	d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
	(aud Lines 20(a), (b), and (c))		
9. O	other Disbursements	0.00	0.00
0. F	Federal Election Activity (2 U.S.C 431(20))		
((a) Shared Federal Election Activity		
	(from Schedule H6) (i) Federal Share	0.00	0.00
	(i) i euclai Silale		
	(ii) "Levin" Share	0.00	0.00
((b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
((c) Total Federal Election Activity (add	0.00	0.00
	Lines 30(a)(i), 30(a)(ii) and 30(b))		
1. T	otal Disbursements (add Lines 21(c), 22,		
2	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	16596.79	189892.57
	Total Federal Disbursements		
	subtract Line 21(a)(ii) and Line 30(a)(ii) rom Line 31)	16596.79	189892.57
- "	Unit Ellio 31/	10000.70	103032.57

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

	III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33.	Total Contributions (other than loans) from Line 11(d), page 3)	4000.00	162187.00
34.	Total Contribution Refunds (from Line 28(d))	0.00	0.00
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	4000.00	162187.00
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	96.79	4392.57
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	96.79	4392.57

FE6AN026

SCHEDULE A (FEC Form 3X)

	EDULE A (FEC Form 3X) IIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 13 (check only one) X
or for c	ormation copied from such Reports and Sommercial purposes, other than using the ME OF COMMITTEE (In Full) nerican Academy of Dermatology A	e name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full A. Bru	Name (Last, First, Middle Initial) ce A. Brod ling Address Ste 200			Date of Receipt
<u></u>	1650 Crooked Oak Dr		7:- Oada	07 30 2008
City	ncaster	State PA	Zip Code 17601-4208	Transaction ID: 50D3BE4A-ABFA-4765 Amount of Each Receipt this Period
FEG	C ID number of contributing eral political committee.	C	17001 4200	500.00
<u>Lan</u>	ne of Employer matology Associates of locaster seipt For: Primary General Other (specify)	Occupatio Physician Aggregate]
3. Ken	Name (Last, First, Middle Initial) idall A. Morrison ling Address 660 Holiday Dr			Date of Receipt
City		Ctata	7in Cada	07 31 2008
City	ossville	State TN	Zip Code 38555-5822	Transaction ID: a84806b37d50e6e08d7
FE	C ID number of contributing eral political committee.	C	36333-3622	Amount of Each Receipt this Period 500.00
Nar Cur	ne of Employer mberland Dermatology	Occupatio Dermato		
Rec	eipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
	Name (Last, First, Middle Initial) Tran			Date of Receipt
Mai	ling Address Bldg 220 Ste 224			07 22 7 2008
City		State	Zip Code	Transaction ID: 56A32D44-8793-46EA
FEC	e Villages CID number of contributing eral political committee.	C	32162-5602	Amount of Each Receipt this Period 500.00
Villa <u>me</u> t	ne of Employer age Dermatology & Cos- ic Surgery	Occupatio D.O.	n	
Rec	eeipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
SUBT	OTAL of Receipts This Page (optional) .	1		1500.00

S

SCHEDULE A (FEC Form 3X TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 13 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may not be sold or used by any per the name and address of any political committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Academy of Dermatology	Association Political Action Committee	
Full Name (Last, First, Middle Initial) Mark S. Wallis Mailing Address 4021 Castle Ridge I	Dr	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: c6bd76db55a01ab1ae7
Longview FEC ID number of contributing federal political committee.	TX 75605	Amount of Each Receipt this Period 500.00
Name of Employer Self-Employed	Occupation Dermatologist	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	•	500.00
TOTAL This Period (last page this line number only)	<u> </u>	2000.00

A.

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 13 (check only one) 11a 11b X 11c 12 13 14 15 16 17
Any information copied from such Reports and St or for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full) American Academy of Dermatology As	sociation Political Action Committee	
Full Name (Last, First, Middle Initial) McCrery for Congress Committee Mailing Address PO Box 7665 333 Texas Street Suite	1900	Date of Receipt 0 7 1 5 2 0 0 8
City	State Zip Code	Transaction ID: 17eaa6d028334f9de0f
Shreveport FEC ID number of contributing federal political committee.	C C00220186	Amount of Each Receipt this Period 2000.00
Name of Employer	Occupation	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

SUBTOTAL of Receipts This Page (optional)	•	2000.00
TOTAL This Period (last page this line number only)	<u> </u>	2000.00

В.

President District:

SCHEDULE B (FEC Form 3X) TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one) X 21b 22 27 28a	PAGE 9/13 23 24 25 26 28b 28c 29 30b
ny Information copied from such Reports and Stater r for commercial purposes, other than using the nam			
NAME OF COMMITTEE (In Full) American Academy of Dermatology Associated in Full)	siation Political Action Comr	nittee	
Full Name (Last, First, Middle Initial) Merchant Services			tion ID: V94386-590526759624 Disbursement
Mailing Address PO Box 6603 City Hagerstown	State Zip Code MD 21741-6603		of Each Disbursement this Period
Purpose of Disbursement VS/MC Fee Candidate Name		001 category/	30.19
	ement For: Primary General Other (specify)	Type In-Kind	
Full Name (Last, First, Middle Initial) Merchant Services Mailing Address PO Box 6603			tion ID: V94386-821300685405 Disbursement
	State Zip Code MD 21741-6603	Amount	of Each Disbursement this Period
Purpose of Disbursement Visa/MC Fee Candidate Name	C	001 ategory/ Type	66.60
Office Sought: House Disbursi Senate President	ement For: Primary General Other (specify) \	In-Kind	

SUBTOTAL of Disbursements This Page (optional)	<u> </u>	96.79
TOTAL This Period (last page this line number only)		96.79
TOTAL This Period (last page this line number only)	•	30.13

State:

SCHEDULE B (FEC Form 3X)

		Use separate schedule(s)			R LINE eck only		.п.		L	FAGL	: 10 / 1	<u>ა</u>
П _	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page			21b 27	22 28a	X	23 28b	2	4 8c	25 29	☐ 2 3
	y Information copied from such Reports and State for commercial purposes, other than using the national NAME OF COMMITTEE (In Full)	ne and address of any political	comr	nitte	ee to sol							
	American Academy of Dermatology Asso	ciation Political Action Co	mmı	πe	е							
	Full Name (Last, First, Middle Initial) Charles A. Gonzalez Congressional Cam Mailing Address PO Box 12612	oaign					of Di	sburs	: 271 ement		552154 2 0 0 8	
	City San Antonio	State Zip Code TX 78212				Amou	int of	Each	Disbu	rseme	nt this F	eriod
	Purpose of Disbursement Contribution Candidate Name Charles Gonzalez		Ca	011 tego	ory/			•		1	500.00)
		ement For: 2008 Primary X General Other (specify)		уре	,							
	Full Name (Last, First, Middle Initial) Christopher Shays for Congress Commit	ee				Date of		sburs	ement		885888	
	Mailing Address 98 East Avenue Rear B 98 East Avenue Rear B					0 7			2 /	2	2 0 0 8	
	City Norwalk	State Zip Code CT 06851				Amou	int of	Each	Disbu		nt this F	
	Purpose of Disbursement Contribution Candidate Name Christopher Shays		Ca	011 tego	ory/			•		1	500.00)
	Office Sought: X House Disbur	ement For: 2008 Primary General Other (specify)		уре	,							
	Full Name (Last, First, Middle Initial) Friends of Gayle Harrell					Date		-	ement		84106	
	Mailing Address 1885 N.W. Eagle Point					0 7	IVI .		4 /	. 2	ž 0 ŏ 8	
	City Stuart	State Zip Code FL 34994				Amou	int of	Each	Disbu	rseme	nt this F	erioc
	Purpose of Disbursement Contribution			011		L.	_	_		1	500.00)
	Candidate Name Gayle B. Harrell			tego ype	-							
	X	ement For: 2008 Primary General Other (specify)										
	State. 1 E Diotriot. 10											

IT	CHEDULE B (FEC Form 3X)		arate schedule(s)	_	NUMBER: PAGE 11/13
	EMIZED DISBURSEMENTS	for each	category of the Summary Page	(check only	y one)
	y Information copied from such Reports and Stat for commercial purposes, other than using the na			by any person f	or the purpose of soliciting contributions
V O	NAME OF COMMITTEE (In Full)	The and addre	ss of any political	Committee to so	micit contributions from such committee
\rangle	American Academy of Dermatology Ass	ociation Pol	itical Action Co	mmittee	
	Full Name (Last, First, Middle Initial) Musgrove for U S Senate				Transaction ID: 08081-09441775083
	Mailing Address PO Box 24477				07 D 23 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	1076 Highland Colony	•	7: 0 1		
	City Jackson	State MS	Zip Code 39225		Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution			011	5000.00
	Candidate Name David Ronald (Ronnie) Musgrove			Category/ Type	
	Office Sought: House Disbu	rsement For: Primary	2008 X General		
	State: MS District:	Other (spe	ecify) 🔻		
	Full Name (Last, First, Middle Initial) Pat Roberts for U S Senate Inc				Transaction ID: 27118-65525454282 Date of Disbursement
	Mailing Address PO Box 433				$\begin{bmatrix} \begin{smallmatrix} M & M \\ 0 & 7 \end{smallmatrix} & \begin{smallmatrix} D & 1 & 4 \\ \end{smallmatrix} & \begin{smallmatrix} D & 1 & 4 \\ \end{smallmatrix} & \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 8 \\ \end{smallmatrix}$
	City Great Bend	State KS	Zip Code 67530		Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution			011	3000.00
	Candidate Name Pat Roberts			Category/ Type	
	Office Sought: House Disbu	rsement For: X Primary	2008 General		
	President	Other (spe	ecity) 🔻		
	State: KS District: Full Name (Last, First, Middle Initial)	Other (sp	eciry) 🔻		Transaction ID: 96545-7534753680
	State: KS District:	Other (sp	ecity) 🔻		Date of Disbursement
	State: KS District: Full Name (Last, First, Middle Initial)	Other (sp	еспу) 🔻		
	State: KS District: Full Name (Last, First, Middle Initial) People for English	Other (spe	Zip Code 16507		Date of Disbursement O 7 D D D V Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	State: KS District: Full Name (Last, First, Middle Initial) People for English Mailing Address PO Box 1940 City	State	Zip Code	011	Date of Disbursement O 7 D D D V Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	State: KS District: Full Name (Last, First, Middle Initial) People for English Mailing Address PO Box 1940 City Erie Purpose of Disbursement	State	Zip Code	011 Category/ Type	Date of Disbursement M 7 M / D 0 D / Y 2 0 0 8 Y Amount of Each Disbursement this Period
	State: KS District: Full Name (Last, First, Middle Initial) People for English Mailing Address PO Box 1940 City Erie Purpose of Disbursement Contribution Candidate Name Phil English Office Sought: X House Senate	State PA Sement For: Primary	Zip Code 16507		Date of Disbursement M 7 M / D 0 D / Y 2 0 0 8 Y Amount of Each Disbursement this Period
	State: KS District: Full Name (Last, First, Middle Initial) People for English Mailing Address PO Box 1940 City Erie Purpose of Disbursement Contribution Candidate Name Phil English Office Sought: X House Disbu	State PA	Zip Code 16507	Category/	Amount of Each Disbursement this Period

В.

President

District: 09

ago,, 2000 101 1000			
SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE	
		(check only 21b 27	22 X 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and State or for commercial purposes, other than using the na			
NAME OF COMMITTEE (In Full)			
American Academy of Dermatology Asso	ciation Political Action Com	nmittee	
Full Name (Last, First, Middle Initial)			Transaction ID: 44559-9591943621635
Porter for Congress			Date of Disbursement
Mailing Address 7840 Red Leaf Drive			$\begin{bmatrix} \begin{smallmatrix} M & 7 & M \\ 0 & 7 & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 8 \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 8 \end{smallmatrix} \end{bmatrix}$
City Las Vegas	State Zip Code NV 89131		Amount of Each Disbursement this Period
Purpose of Disbursement Contribution		011	1000.00
Candidate Name Jon Porter, Sr.		Category/ Type	
Office Sought: X House Disbur Senate President State: NV District: 03	sement For: 2008 Primary X General Other (specify)		
Full Name (Last, First, Middle Initial) Schakowsky for Congress			Transaction ID: 75286-0060693621635 Date of Disbursement
Mailing Address PO Box 5130			$\begin{bmatrix} \begin{smallmatrix} M & 7 & M \\ 0 & 7 & M \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & 2 \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 8 \end{smallmatrix} \end{bmatrix} $
City Evanston	State Zip Code IL 60204		Amount of Each Disbursement this Period
Purpose of Disbursement Contribution		011	1000.00
Candidate Name Janice D. Schakowsky		Category/ Type	
Office Sought: X House Disbur	sement For: 2008		

SUBTOTAL of Disbursements This Page (optional)	•	2000.00
TOTAL This Period (last page this line number only)	•	16500.00

Other (specify)

State: IL

Image# 28991677869 Form/Schedule: F3X Transaction ID: